| UNITED STATES DISTRICT COURT | Γ |
|------------------------------|---|
| for the | |

| | for the |
|--|--|
| Г | District of |
| Plaintiff(s) V. Defendant(s) |))) (Civil Action No.)))) |
| SUMMONS I | IN A CIVIL ACTION |
| To: (Defendant's name and address) | |
| A lawsuit has been filed against you. | |
| are the United States or a United States agency, or an of P. 12 (a)(2) or (3) — you must serve on the plaintiff an a | n you (not counting the day you received it) — or 60 days if you ficer or employee of the United States described in Fed. R. Civ. answer to the attached complaint or a motion under Rule 12 of otion must be served on the plaintiff or plaintiff's attorney, |
| If you fail to respond, judgment by default will You also must file your answer or motion with the court | be entered against you for the relief demanded in the complaint. t. DOUGLAS C. PALMER CLERK OF COURT |
| Date: | Signature of Clerk or Deputy Clerk |

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

| was rec | This summons for (na. ceived by me on (date) | me of individual and title, if any | · . | | | | | |
|---------|--|------------------------------------|--|---------|-----|--|--|--|
| | ☐ I personally served | I the summons on the indi- | <u> </u> | ; or | | | | |
| | ☐ I left the summons | | on (date) nce or usual place of abode with (name) | · | ··· | | | |
| | on (date), a person of suitable age and discretion who resides there, on (date), and mailed a copy to the individual's last known address; or | | | | | | | |
| | ☐ I served the summons on (name of individual) designated by law to accept service of process on behalf of (name of organization) | | | | | | | |
| | | | on (date) | ; or | | | | |
| | ☐ I returned the summons unexecuted because | | | | | | | |
| | ☐ Other (specify): | | | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total | 1 of \$ | · | | | |
| | I declare under penalty of perjury that this information is true. | | | | | | | |
| Date: | | _ | Server's signature | | | | | |
| | | _ | Printed name and title | | | | | |
| | | _ | Server's address | | | | | |

Additional information regarding attempted service, etc: